PTO/SB/06 (08-03) Approved for use through 7/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 66623 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED FOR NUMBER EXTRA RATE FEE RATE FEE BASIC FEE OR (37 CFR 1.16(a)) TOTAL CLAIMS OR minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAIMS X S OR minuş 3 (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR E TOTAL OR IATOT * If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY (Column 1) CLAIMS HIGHEST **PRESENT** RATE ADDI-REMAINING NUMBER RATL 100I-**EXTRA** TIONAL ENT PREVIOUSLY TIONAL **AFTER** AMENDMENT PAID FOR FEE FEE Minus ENDME Tolal X S OR X S Q7 CFR 1.16(c) Minus Independent (37 CFR 1.16(b)) X \$ OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADO'L FEE ADD'L FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ω PRESENT RATE ADDI-RATE ADDI-REMAINING NUMBER PREVIOUSLY **EXTRA** TIONAL TIONAL ENT AFTER AMENDMENT FEE FEE PAID FOR Total (3) CFR 1.16(c)) Minus ENDMI OR Mirius Independent. (3) CFR 1.16(6)) X S OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR. TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ပ PRESENT RATE ADDI-NUMBER RATE ADDI-REMAINING **EXTRA** TIONAL TIONAL PREVIOUSLY ENT AFTER FEE AFCCOLLECT PAID FOR FEE Total (3) CFR 1.16(c)) Linus IENDMI X S OR Independent (37 CFR 1.16(b)) Minus X S E OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L I SE ADOL FEE 03 . If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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